Early Childhood Iowa Overview



Early Childhood Iowa (ECI) is a collaborative and comprehensive partnership focused on the integration of an Early Care, Health and Education system in Iowa in order to improve outcomes for children. The current reality is that programs, policies and systems that serve young children are inadequate to meet the changing needs of children and families. ECI supports the efforts of local and state level partners to coordinate, collaborate and integrate efforts that will lead to healthy and successful children.

The initiative is founded on the vision that communities and state government can work together to improve the well being of our youngest children so that "every child, beginning at birth, will be healthy and successful".

Early Childhood Iowa brings together state agencies and other non-governmental partners that support the implementation of a comprehensive, integrated Early Care, Health and Education system. ECI also provides a model of government that promotes local decision making to strengthen and make more efficient the services available for young children and their families.

ECI plays multiple roles within Iowa's early childhood system work to support the result areas of:

- Healthy Children,
- Children ready to succeed in school,
- Safe and supportive communities
- Secure and nurturing families
- Secure and nurturing environments

At a local level, ECI funding is used by citizen-led boards. Through a community planning process, monies are used to fill gaps and assist with meeting identified needs for children prenatal until school entry.

At a state level, ECI funding assists with system development for a comprehensive system of early childhood. Coordination, leadership, partnerships, decision making and accountability for results are keys to success. State government and private entities work together to improve services, programs and activities for lowa's youngest citizens and their families.

To learn more about Early Childhood Iowa, go to: www.earlychildhoodiowa.org or contact the Department of Management, ECI Office: 515/281-4321.

2/22/2013





Dear Iowans:

Carrying on the tradition of being a catalyst to integrate and coordinate an early care, health, and education system of systems for our youngest Iowans, Early Childhood Iowa is excited to share this report and its wealth of information about young children and their families.

The initiative is founded on the vision that communities and state government can work together to improve the well-being of our youngest children so that "every child, beginning at birth, will be healthy and successful". Recognizing the importance of a young child's early development, aged 0 to 5 years (their first 2000 days), the Early Childhood Iowa Board engages in efforts to unite agencies, organizations, and community partners to speak with a shared voice and meet a set of results on behalf of all young children and families.

The 45-ECI areas and boards represent all 99 counties, each with its own leadership and locally-developed community plan. In the Results Accountability section of this report, we provide an enhanced format for sharing data about the local efforts made to support young children and their families.

Within this report, the Early Childhood Iowa State Board, ECI Stakeholders, area boards, programs, and services reflect constant change, adaption and leadership to support partnerships that strengthen our early care, health, and education system. Their work keeps the greatest needs of our youngest Iowans on the forefront. Their voices can't be ignored if our state is to be strong on the education, economic and global stages. Early Childhood Iowa is ready, able and positioned to help bridge those platforms and build a future generation of Iowans who will stay, work and prosper in this great state. Thanks to everyone who contributed to this worthy effort.

Respectfully Submitted,

Joanne Lane, Vice Chairperson Early Childhood Iowa State Board



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Early Childhood Iowa

Early Childhood Iowa Initiative

Early Childhood Iowa (ECI) is a collaborative and comprehensive partnership for the integration of an early care, health, and education system in Iowa to improve outcomes for children. ECI developed a Strategic Plan that serves as the single plan for Iowa's Early Childhood (EC) System. The Strategic Plan outlines the priorities and strategies for the EC system and predicts the work of state agencies and public/private partnerships. The current reality in Iowa is that programs, policies, and systems that serve young children are inadequate to meet the changing needs of children and families. The plan offers a framework to support the efforts of local and state level partners to coordinate, collaborate, and integrate efforts that will lead to healthy and successful children. The plan is framed around five achievable result areas:

- Healthy children
- o Children ready to succeed in school
- Safe and supportive communities
- Secure and nurturing families
- o Secure and nurturing early learning environments

The Early Childhood lowa plan was developed with input from various public and private stake-holder groups at the local and state level. Early Childhood lowa brings together system building projects to support the implementation of a comprehensive early childhood system. The plan is a living, breathing document that will be reviewed yearly to assess the emerging issues of the system. The plan belongs to all stakeholder groups and organizations who believe working together collaboratively to coordinate common goals and outcomes will lead to greater success than is possible when working in silos. The ECI Strategic Plan and ECI Framework, which serves as a marketing tool, can be found at www.earlychildhoodiowa.org.

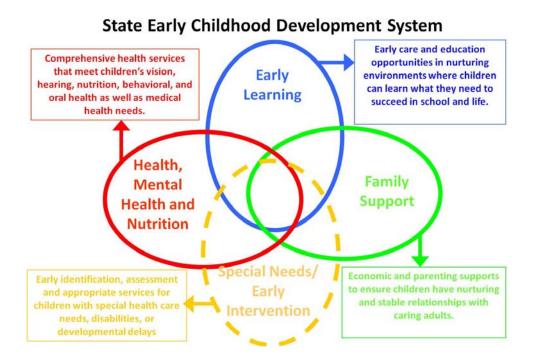
Early Childhood Iowa's vision is "Every child, beginning at birth, will be healthy and successful." This vision has been adopted by early childhood partners and serves as the vision of the early care, health, and education system.

While Early Childhood Iowa is stakeholder driven, it is also grounded in national and state level evidence-based information which guides system change. The plan embraces the four system ovals for system integration, described in the next section.

An early childhood system is made up of interrelated parts working together toward a common goal: to ensure the healthy growth and optimal development of young children in the context of their families.

ECI System Framework

A system framework involves more than individual components successfully operating separately. These components must work together in a coordinated and effective way. Early Childhood Iowa considers programs, policies, strategies and planning efforts that integrate all systems in the lives of Iowa's young children and their families and how those systems work together.



Examples of these Linkages in Iowa's Early Childhood System might include:

- Effective referral protocols between health providers and Early ACCESS (IDEA, Part C)
- Effective referral protocols between early care and education programs and mental health services
- The inclusion of mental health consultants in early care and education environments
- lowa's 1st Five Healthy Mental Development Initiative coordinating with family support programs

Some issues overlap all the system-building components and linkages such as the role of Early Childhood lowa and our partners to coordinate, educate and communicate system building efforts and raise awareness of the importance of a strong early childhood system.

ECI Alliance Meetings

Activities, Products and Events through the ECI Stakeholder Alliance and Component groups:

- The Early Childhood Iowa Stakeholder Alliance (Alliance) adopted new bylaws during SFY 2012. The bylaws include the responsibilities of the Alliance as the Governor designated Early Childhood Advisory Council. The Alliance Steering Committee can, on behalf of the Alliance conduct business and is required to have membership to meet the federal requirements of an ECAC. Recruitment efforts were used to fill positions needed to meet the requirements. The Stakeholder Alliance also reviewed and adopted policies and procedures for revising the purpose statement, vision statement, guiding principles, key messages and core beliefs.
- An Alliance survey was developed and distributed on-line to a broad audience to assess
 the level of commitment and work of current and potential members. Overall, over 250
 stakeholders completed the survey and were engaged at the local and statewide level,
 with varying degrees of time commitment by the end of SFY 2012.
- The Alliance provided input to the Departments of Education, Human Services, and Public Health and to the Governor's Office regarding the Early Learning Challenge grant.
- The Alliance adopted a new marketing campaign The First 2000 Days Last a Lifetime. It was unveiled to the public at the February 8, 2012 meeting.
- The annual Early Childhood Iowa Congress (conference) was held on February 8 and 9, 2012. Over 150 members attended the Stakeholder Alliance meeting on February 8 and over 300 people attended the conference day on February 9.
- The structure of ECI includes six system component groups that describe the necessary elements of an effective and comprehensive early childhood system. Membership in each component group is open to anyone with an interest in one of the six component areas: Quality Services and Programs; Public Engagement; Professional Development; Governance; Planning and Administration; Results Accountability; and Resources and Funding. Visit the component group pages below to learn about group activities, meeting materials and view products. http://www.earlychildhoodiowa.org/state_system/
 ECI comp_wrkgrps/index.html

- The ECI diversity committee developed and distributed an 'lowa ECI Cultural Competencies' guidance
 document to assist Early Childhood programs in assessing the level of cultural competency in current and
 future practices to better ensure diversity is infused into policy. With ECAC funding, a training was developed and delivered to CCR&R consultants to assist them in including cultural competence in all training
 and consultation.
- Using the recommendations of the Results Accountability Component Group, the ECI State Board adopted revised indicators to quantify and track progress toward the statewide results.
- The Professional Development steering committee has adopted the NAEYC Professional Development Glossary Dictionary to ensure consistency across the ECI sub-groups and workgroups.
- ECAC hosted a statewide Parent Summit on March 10, 2012. A total of 52 parents attended and 22 signed up to be involved in next steps from which we hope to form a parent council. Nearly half of the participants were outside of central lowa suggesting a truly statewide representation. Evaluations showed that 90 percent or more of attending parents felt the summit met their expectations, was a useful experience, and they enjoyed meeting other parents.



ECAC and ECCS Grant Updates

Activities of the Early Childhood Advisory Council (ECAC) Grant:

Conduct a NEEDS ASSESSMENT

- A workgroup was convened to develop a Request for Proposals (RFP) to hire a contractor to conduct the comprehensive needs assessment. The work group defined the parameters of the RFP, including the goals, objectives, scope of work and the deliverables, and identified the existing, recent needs assessments, reports and data sources to assist the contractor in completing the needs assessment.
- The Child and Family Policy Center, Des Moines, Iowa was awarded the contract to conduct the Needs Assessment. The work to begin on May 1, 2012 and will be completed no later than April 30, 2013.

Develop a framework for an EARLY CHILDHOOD DATA SYSTEM

- The ECI Results Accountability workgroup serves as the core work team to oversee the project.
- The workgroup had its kickoff meeting November 17, 2011 to begin the process of developing a vision for the project and the language for an RFP. A contractor was sought to assist in the development of key policy questions, define potential users, develop a governance and planning process, take stock of current data efforts, and develop an action plan for improvements in the data systems.
- Through a formal RFP process, Gold Systems, Inc. of Salt Lake City, Utah, was selected as the contractor to conduct the work by April of 2013. The key deliverables include:
 - Stakeholder Discovery (What stakeholders want to know and how to access information)
 - Existing Systems Discovery (Data element, common data elements, processes, outputs, security, and interfaces, examples of systems from other states)
 - High-Level System Framework (Define system use, options for integrated or interoperable systems, methods for implementation, and costs for implementation and maintenance)

Fully implement Early Childhood Iowa's PROFESSIONAL DEVELOPMENT framework

 In collaboration with the Iowa Department of Education, the ECI Professional Development Steering Committee oversaw the completion of a descriptive landscape of early childhood professional development (PD) in Iowa, conducted by the Frank Porter Graham Center.

- A WAGE\$ Taskforce has been created to start discussing a WAGE\$ project for lowa. The Taskforce
 will create a project proposal for a compensation initiative as required by the PD Systems Coordination Contract held by Iowa AEYC.
- An Iowa Early Learning Standards (IELS) Review Committee was established. The committee is comprised of over 50 people representing a variety of stakeholders; CCR&R, DHS, DE, IDPH, AEA, Head Start, preschool, child care and kindergarten programs, and colleges and universities. The charge for the IELS Review Committee, by the end of 2012, is to review and revise, where needed, the Iowa Early Learning Standards. During this revision, the committee will also consider the following:
 - Related documents used within the state's early childhood communities such as Creative Curriculum Gold and Head Start performance standards, among others
 - o Alignment of the IELS with Iowa's Core Curriculum
 - Current research and developmentally appropriate practices related to children from birth to five years of age

Activities of the Early Childhood Comprehensive Systems (ECCS) Grant:

Develop a marketing plan for the 2,000 DAYS CAMPAIGN

- "There are approximately 2,000 days between birth and the first day of kindergarten. These first 2,000 days have a profound impact on a child's future wellbeing, ability to learn, and overall life success."
- In collaboration with the ECAC grant, IDPH contracted with ZLR Ignition to develop a marketing plan for the 2,000 days campaign. The plan includes a new 2,000 days brand/logo, brochure template to be customized for ECI's three audiences for 2013 (policy makers, business, and parents), a tabletop display, and social media strategies.



 In late 2012, the 2,000 days logo and brochure template were released to the ECI area directors, ECI Stakeholders Alliance, and the ECI Agency Directors.

Conduct a FISCAL ASSESSMENT of early childhood funding in Iowa

 IDPH hired an intern to assist with conducting the early childhood fiscal assessment. Fiscal data for 2011 was received from all state departments for programs related to early childhood. Currently, staff are analyzing the data and the fiscal assessment will be released in early 2013.

Technical Assistance to Communities

Accomplishments in Calendar Year 2012

As part of the infrastructure for Early Childhood Iowa, legislation directs the six state agencies represented on the state board to designate staff as they are able, to work as a technical assistance (TA) team, along with the Early Childhood Iowa Office in the Department of Management. The role of the team is to provide coordination and other support to the state's comprehensive early childhood system.

In 2012, the team consisted of representation from the Departments of Education, Human Services, Management, Public Health and the Economic Development Authority. Two departments Human Rights and Workforce Development, are unable to dedicate staff to this work; however all six departments remain dedicated to ECI at the state board level. The TA team assisted the state board in providing the following:

- Development of the procedure and training for ECI area boards regarding the annual audit required of ECI areas, in collaboration with the Fiscal Accountability Work Group of the state board.
- Completion of the first round of reviews for the Levels of Excellence rating system, the designation process for ECI area boards.
- Targeted technical assistance to ECI area boards that are merging in order to meet the new legislated requirements for ECI area boundaries.
- Assistance in the consistent interpretation of the common program performance measures for all ECI funds.
- Leadership roles within the ECI component workgroups and the Stakeholders Alliance to move the system forward.
- Movement toward the design of a unified data system that supports state early learning and development goals for children and families, in collaboration with the Department of Education, the objectives of the Early Childhood Advisory Council grant and other early childhood partners.
- Meetings with ECI area boards to address specific questions regarding legislation and best practice for operations.

In addition, on-going technical assistance continued by way of telephone, e-mail and on-site visits, as well as the on-line ECI "tool-kit", quarterly ECI area director meetings, and the area annual report review process.

Early Childhood Iowa Web Site

The ECI web site, www.earlychildhoodiowa.org, continues to be a well utilized resource for the early care, health and education system building work. In FY12, there were over 22,500 visits to the site. Those that accessed the site were from each part of lowa, extending throughout the United States and even other countries. Fifty-three percent were returning visitors and 47 percent were new visitors. Based on information gathered regarding the servers used to access the site, it is estimated that 14 percent of the total visits were from state employees, while the remainder were from public users.

ECI continues to receive feedback regarding the comprehensive nature of the information available on the site, as well as the website's functionality. We offer our thanks to lowa Interactive for their design and on-going support of the site.



Technical Assistance to Communities

Web-based Learning

ECI continues to more fully utilize technology. The ECI State Board meetings are offered as Go-To Meetings which allow those interested individuals to attend the meetings without having to physically be present.

This method of transmitting information was also employed for training opportunities. It greatly reduced the amount of time and travel for the TA team, presenters and participants, resulting in offerings that were well attended. The TA team's goal was to provide a learning opportunity each month for individuals that: serve on ECI area boards, serve on the ECI State Board, provide local programs and services, or have an interest in the specific topic being offered.

Each of the webinars were recorded and placed on the ECI web site as an on-going resource, http://www.state.ia.us/earlychildhood/EC resources/eci webinars/index.html. Following are the trainings that were offered in 2012 and a short description of each:

<u>January – Family Support Data (attendance: 137)</u> – In this workshop, Janet Horras, IDPH, reviewed trends from statewide family support data collected from 2009 – 2011. Also discussed were methods for reviewing and using data for quality improvement efforts.

<u>February - Developing a Solid RFP (attendance: 37)</u> – This workshop, presented by Keith Wunder from the DHS Contracting Unit, discussed the purpose of an RFP, identified the components of an RFP, and discussed the RFP review, award and appeal process.

<u>March – Audit Guidance for ECI Area Boards (attendance: 76)</u> – Suzanne Dahlstrom from the State Auditor's Office provided an overview of ECI's audit and financial agreed upon procedure requirements.

<u>April - Maternal, Infant, Early Childhood Home Visitation (MIECHV) Expansion Grant update</u> (<u>attendance: 64</u>) – Plans to implement or expand evidence-based home visitation in the 14 targeted at-risk communities and the plan to build a stronger infrastructure to support home visiting in lowa was shared.

<u>May - Contracting for Services (attendance: 22)</u> – Keith Wunder, DHS Contracting Unit, discussed the purpose of a contract, the connection between the request for proposal and the contract, the components of a contract, and the role of the contract manager.

<u>July - Indirect Cost Rates: Where Do They Come From and What Do They Mean? (attendance:</u>
<u>45)</u> – This webinar, presented by Joel Dirks, West Central Community Action in Harlan and Arlene McAtee, Mid-Iowa Community Action in Marshalltown, walked through the process agencies must use to receive an approved indirect cost rate and discussed what the rate may cover. It also explained why an agency must charge all funders this rate once it has been approved and what happens if a funder does not pay the rate.

<u>July - Family Support Reporting Refresher Training (attendance: 87)</u> – This webinar was a refresher on ECI reporting requirements for family support programs, including completion of the Life Skills Progression and Protective Factors Survey.

<u>August - 2010 Iowa Child and Family Household Health Survey - Early Childhood Report</u>
(<u>attendance: 69</u>) – Peter Damiano, University of Iowa, shared the results of this survey, focusing on the disparity of the health of Iower income children.

<u>November - Conducting a Needs Assessment (attendance: 29)</u> – John Durbin, Planning Manager, IDPH, presented successful strategies and reasons for completing a comprehensive community needs assessment.

<u>December - Introduction to the new Family Support Data System (attendance:157)</u> – Janet Horras and the family support team at IDPH provided information regarding the new data system requirements, reviewed the timeline for implementation of the new data

system, and answered frequently asked questions concerning this transition.



Early Childhood Iowa Results Accountability

Accountability for results continues to be the hallmark of Early Childhood Iowa (ECI). The following pages showcase the data collected by Early Childhood Iowa.

When looking at the following information, it is important to realize that the Early Childhood lowa initiative is not a program in and of itself. Instead, ECI funds are legislated to support existing local programs and services by filling gaps – most often by allowing additional families/children to be served, or by increasing the quality of the services provided. As the coordinating body within their ECI area, it is the ECI Area Board's responsibility to pull the community together to collectively determine the strengths, gaps and needs of the families and young children served. Ultimately, the board makes funding decisions that will impact the priorities determined through the strategic planning process.

Presentation of the Report Data:

The data within this report is organized by Result area and showcases information at the state level (indicators), as well as local program data.

The presentation of the data utilizes the following sequence:

Results

At its inception in 1998, legislation established five results to be achieved, both statewide and at the local level. ECI (then Community Empowerment) utilized the Accountable Government Act as the standard for measuring progress toward accountability. A result is defined as "the effect desired for all lowans". The legislated results are:

- Healthy Children
- Children Ready to Succeed in School
- Safe and Supportive Communities
- Secure and Nurturing Families
- Secure and Nurturing Early Learning Environments

Indicators

The Early Childhood Iowa State Board collects and reports statewide indicator data to quantify and track progress toward the statewide results. An indicator is "a measure that directly or indirectly quantifies the achievement of a result. It measures the whole population, prenatal through 5 years of age. More than one resource, program or service is necessary to improve an indicator and it often requires collaboration to reach the goal."

In 2011, the Early Childhood Iowa State Board adopted one set of indicators for Iowa's early care, health and education system, merging those previously tracked separately by Community Empowerment and Early Childhood Iowa.

Key: When the indicator trend is moving in a positive direction, it will be shown in a green box; when it is moving in a negative direction, the box is red. Neutral indicators will be presented in a yellow box.

Note: Specific data for each indicator can be found on the ECI website at the following link, http://earlychildhoodiowa.org/EC resources/annual reports/2012 annual reports.html.

Program Performance Measures

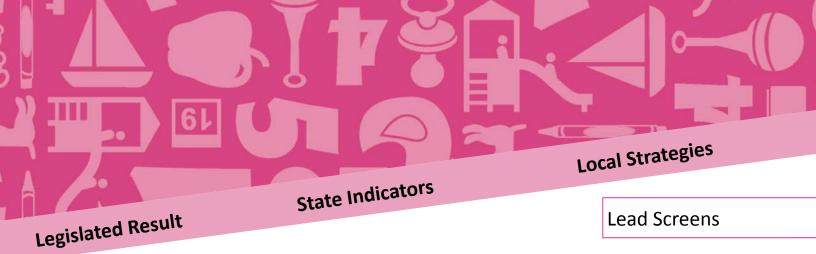
A performance measure "measures the success of a service, product, or activity for the population served". In FY11, the ECI State Board adopted consistent program measures which are required to be reported by all programs funded with both Early Childhood and School Ready dollars. This information is submitted in the local annual reports submitted to the ECI Office. The data is then compiled and shared from a state perspective in the ECI state annual report.

ECI Director Services and Local Board Support Performance Measures

Because the details regarding funding and performance measures for ECI Area Board Operations and Staff are not specific to any one of the state results, the information can be found on the ECI website at the following link, http://earlychildhoodiowa.org/EC resources/
annual_reports/2012_annual_reports.html under Historical Information.

Note: An Executive Summary for each ECI Area can be found on the ECI website at the following link, http://www.state.ia.us/earlychildhood/EC_resources/annual_reports/index.html, click on 2012 Annual Report.





Children Healthy

Low Birth Weight

Immunized Children

Mental Health

Prenatal/Postnatal Services

Dental Services

Developmental **Delays**

hawk-i Outreach

Local Performance Measures

- 2 of the 51 ECI areas supported mental health services
- \$173,875 total funds reported

(ECI: \$28,728; Non-ECI: \$145,147)

- 800 children
- \$217 average cost per child, based on the total funds reported
- 88% of the children/mothers screened that needed follow up services, received them

- 7 of the 51 ECI areas supported screening young children for high levels of lead
 - \$117,372 total funds reported

(ECI: \$64,853; Non-ECI: \$52,519)

- 1,693 children were screened
- \$69 average cost per child, based on the total funds reported
- 90% of the children identified with elevated lead levels received follow up service
- 9 of the 51 ECI areas supported these services
 - \$116,519 total funds reported

(ECI: \$84,213; Non-ECI: \$32,306)

- 643 children were served (includes prenatal children)
- \$181 average cost per child, based on the total funds reported
- 21% screened that needed follow up/treatment, received the services
- 18 of the 51 ECI areas supported dental screens
- \$500,429 total funds reported

(ECI: \$270,920; Non-ECI: \$229,509)

- 13,346 children were screened
- \$37 average cost per child, based on the total funds reported
- 89% of the children screened were cavity free
- 51% children that need dental treatment went to a dentist
- 2 of the 51 ECI areas specifically supported services targeted at identification of developmental delays
- \$98,219 total funds reported

(ECI: \$59,673; Non-ECI: \$38,546)

- 1,148 children were served
- \$86 average cost per child, based on the total funds reported
- 36% of the children screened for developmental delays and needed follow up services, received them
- 1 of the 51 ECI areas supported outreach for families to access health insurance
- \$4,787 total funds reported

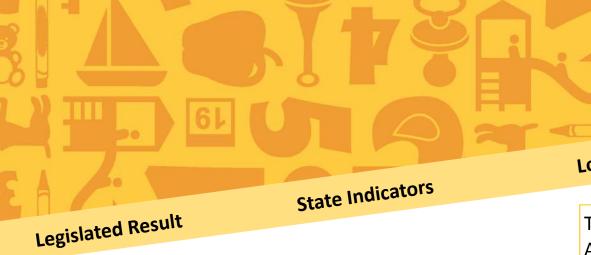
(ECI: \$4,787; Non-ECI: \$0)

• 100% of the children applying for *hawk-i* and Medicaid enrolled in the programs

Other Factors Impacting this Result: I-SmileTM; Project LAUNCH; Help Me Grow; ACES; *hawk-i* Outreach; 1st Five Healthy Mental Development; EPSDT; Title V Child Health; Period of Purple Crying; Early Hearing Detection and Intervention; Newborn screening; Immunizations; Lead Screening

Additional Partners that Assist in Moving Indicators in a Positive Direction: Local Public Health; WIC Clinics; IDPH;

Child Health Specialty Clinics; Local Title V Child Health Agencies; DHS



Local Strategies

Tuition Assistance/Scholarships

eady to

Pre-literacy Skills

Transportation

Scholarship/Tuition Coordination

Quality Early Learning Environments

Literacy Programs

Local Performance Measures

- 51 of the 51 ECI areas supported this service
- \$5,475,537 total funds reported (ECI: \$4,128,534; Non-ECI: \$1,347,003)
- 4,146 children received a scholarship
- \$1,321 average cost per child, based on the total funds reported
- 82% of the children served demonstrated age appropriate skills. As measured by: GOLD, Creative Curriculum Continuum, Brigance, ASQ,IGDIs, High Scope, Ireton Dev. Checklist, Saxon Math, Locally Developed Assessments

- 21 of the 51 ECI areas supported this service
- \$974,384 total funds reported (ECI: \$288,457; Non-ECI: \$685,927)
- 769 children were provided transportation assistance
- \$1,267 average cost per child, based on the total funds reported
- 88% of the days preschool was offered that children were able to attend because of transportation assistance
- 25 of the 51 ECI areas supported scholarship coordination
- \$312,834 total funds reported
 (ECI: \$301,735; Non-ECI: \$11,099)
- 77% of the children that applied for tuition assistance receive it

- 7 of the 51 ECI areas supported these services
- \$109,929 total funds reported

(ECI: \$57,756; Non-ECI: \$52,173)

- 4,112 children were screened
- \$27 average cost per child, based on the total funds reported
- 83% of parents report an increase in reading to their child each day
- 83% of parents report an increase in talking with their child about new words in stories

Other Factors Impacting this Result: Every Child Reads; Statewide Voluntary Preschool Program; Shared Visions; Raising Readers Learning Centers; Reach Out and Read; Childcare Alliance Response Team (CART); childcare/preschool wraparound programs; Parents As Teachers; ECI preschool scholarships; Positive Behavior & Intervention Supports; Early Learning Standards

Additional Partners that Assist in Moving Indicators in a Positive Direction: Iowa AEYC; Head Start; DE; United Way; IPTV; Academy of Pediatricians; community-based early education providers; DHS Wraparound funds; Early ACCESS; AEA; ISU



Nurturing

Availability of Child Care

Quality Improvement

Professional

Development

Working Parents

Improved Early Learning

Quality Child Care Ratings

Child Care Consultant

Child Abuse in a Child
Care Setting

Local Performance Measures

- 15 of the 51 ECI areas supported activities to increase participation in Iowa's Quality Rating System (QRS)
- \$857,984 total funds reported (ECI: \$754,411; Non-ECI: \$103,573)

32% of early care and education programs that were reported rated at least level 3 in Iowa's QRS

- 39 of the 51 ECI areas supported professional development opportunities for those working with young children and their families
- \$1,021,753 total funds reported

(ECI: \$867,736; Non-ECI: \$154,017)

75% of the professional development opportunities resulted in ratings, certifications, credentials, renewals

- 35 of the 51 ECI areas supported this service to assist early learning environments (preschools, child care centers, home child care environments)
- \$1,218,808 total funds reported (ECI: \$1,064,791; Non-ECI: \$154,017)
- 37% of children with special needs had a health care plan
- 79% of participants improved health and safety in their early learning environments

- 27 of the 51 ECI areas supported services to improve the quality of programs
- \$890,460 total funds reported

(ECI: \$799,182; Non-ECI: \$91,278)

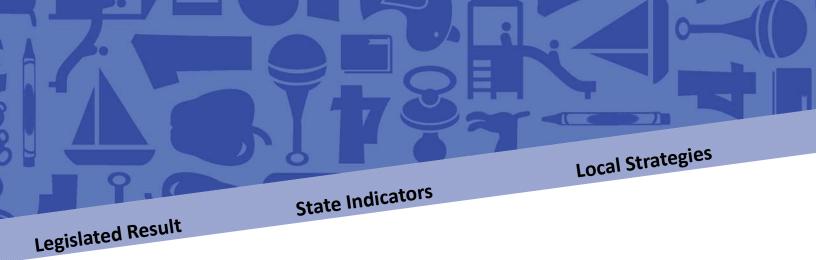
65% of participants were able to improve at the highest level of quality initiative

- 28 of the 51 ECI areas supported a child care consultant
- \$1,841,219 total funds reported

(ECI: \$1,559,650; Non-ECI: \$281,569)

- 71% of participants were able to incorporate developmentally appropriate activities in their early learning environments
- There was a 2% decrease in child care centers/child development homes
- There was a 4% increase in the number of early learning slots available

Other Factors Impacting this Result: Healthy Child Care Iowa; I-Consult



Safe and Nurturing Families

Incidence of Child Abuse

Teen Births

Domestic Violence Rate

Accredited Family
Support Programs in
Iowa

Resource Libraries

Family Support

Emotional/Behavioral Support

Local Performance Measures

- 6 of the 51 ECI areas supported resource libraries
- \$141,443 total funds reported

(ECI: \$48,483; Non-ECI: \$92,960)

 80% of participants increased their knowledge of early childhood growth and development

- 51 of the 51 ECI areas supported family support services
- \$17,309,770 total funds reported

(ECI: \$13,242,608; Non-ECI: \$4,067,162)

- 84.32% of participating families improved or maintain healthy family functioning, problem solving and communication.
- 81.09% of participating families increase or maintain social supports
- 68.89% of children 0-5 screened for developmental delays
- 58% of the families have a head of household with a high school diploma or less education

For a complete Family Support report go to: http://www.earlychildhoodiowa.org/EC resources/
annual reports/2012 annual reports.html

- 9 of the 51 ECI areas supported emotional or behavioral services for young children
- \$459,331 total funds reported

(ECI: \$427,310; Non-ECI: \$32,021)

 95% of the programs participating in these supportive services reported an increase in their confidence and competence when dealing with children demonstrating emotional/ behavioral challenges

Other Factors Impacting this Result: Help Me Grow; MIECHV; Shared Visions; FaDDS; Even Start; Parents As Teachers

Additional Partners that Assist in Moving Indicators in a Positive Direction: LSI; Prevent Child Abuse Iowa; Head Start;

DHR; community-based service providers (ICCSD, Neighborhood Centers of Johnson County, United Action for Youth,

Children's Center for Therapy); FaDSS



ortive Safe and Supp

Children in Poverty

Unemployment Rate

Child Deaths Due to Unintended Injuries

Crime Rate

Juvenile Crime

Car Seat Safety Checks

Public Awareness Activities

Local Performance Measures 4 of the 51 ECI areas supported car seat safety checks \$9,735 total funds reported (ECI: \$8,548; Non-ECI: \$1,187) 213 children were screened \$46 average cost per child, based on the total funds reported 64% of the car seats were properly installed prior to the safety check as reported by the car seat safety technician 8 of the 51 ECI areas supported public awareness activities/ child health fairs in their areas \$72,795 total funds reported (ECI: \$61,515; Non-ECI: \$11,280) 85% of parents reported greater awareness of ECI and early childhood services available to their child

Other Factors Impacting this Result: Community Partnerships for Protecting Children , IDPH Community Transformation Grants

Additional Partners that Assist in Moving Indicators in a Positive Direction: Prevent Child Abuse Iowa; DHS

Professional Development Update

ECI receives funding to support professional development activities across early care, health and education system. The following section highlights work from the current projects

Early Childhood—Program Wide Positive Behavioral Interventions and Supports (EC-PBIS)

EC-PBIS focuses on promoting social emotional development and school readiness of young children birth to age five. There are four components to lowa's initiative:

System Collaborations

Trainings

Coaching

Data

EC-PBIS crosses all four ovals of Iowa's Early Care, Health, and Education system. The focus is on quality early care and education programs for all children, promotion of enhanced social and emotional skills (mental health), and family involvement. EC-PBIS is being implemented across early childhood settings in Iowa, including Head Start, Statewide Voluntary Preschool Programs for 4-year Old Children, private childcare centers and preschools, faith based preschools, child development home programs, and family support programs. Coaches and trainers represent Head Start, Area Education Agencies, local education agencies, Child Care Resource & Referral, Early Childhood Iowa, mental health agencies, and community college faculty. Parents also play a critical role in the implementation of PBIS strategies.

This project also receives Part C, IDEA funds and 619, IDEA funds to support its activities and outreach.

Summary of data or actual data from the project for the grant period to date:

- 97 early childhood professionals were trained on coaching methods. They represented AEAs, LEAs, CCRR, Head Start, ISU Extension, and Early Childhood Iowa. They provided coaching to early care and education settings that are implementing EC-PBIS strategies.
- Three "Communities": HAWC ECI area, Mahaska County, and Marshalltown piloted community-wide PBIS.
- 50 early childhood professionals received training on the new module: "Creating Classrooms That Work for Every Child: Implementing the Pyramid Model in Inclusive Settings". They represented AEAs, LEAs, Head Start, and CCRR. They are training staff within their own agencies.
- Approximately 100 early care and education professionals were trained on the new Home Visitation Modules. They represented AEAs, Head Start, and Family Support programs. They are training staff within their own agencies.
- Guidelines for coaching have been developed.
- The data system continued to be refined.
- Sub-contract with Iowa State University for two staff to provide training and coaching.

T.E.A.C.H. Early Childhood® IOWA

T.E.A.C.H. is an early childhood workforce initiative that strives to increase the education and compensation levels of the child care and early learning workforce. Following a national model licensed from Child Care Services Association, North Carolina, the Iowa Association for the Education of Young Children holds the license to provide T.E.A.C.H. for the state of Iowa. With the support of these Early Childhood Iowa state-wide professional development funds, 165 early care and education teachers, providers and directors in Head Start, private child care centers and preschools, family child care, and public preschools worked to complete coursework requirements during the past contract year towards CDA credentials, associate and bachelors' degrees in early childhood education, and early childhood endorsements to teaching licenses. Scholarship contracts support tuition, books, travel stipends, substitute time, and compensation increases for this poorly compensated workforce.

T.E.A.C.H. impacts Early Childhood Iowa's system building efforts by working to improve the accessibility, availability, and quality of higher education and professional development, and improve the quality of early care and education programs.

T.E.A.C.H. successfully blends federal, state, and local public funding with private dollars from sponsoring programs and entities such as United Way of Central Iowa. Federal funds from the Child Care Development Fund through the Iowa Department of Human Services and Part B – 619 (special education) funding from the Iowa Department of Education, and state funds from local ECI areas, supplement the Early Childhood Iowa state-wide professional development funds. T.E.A.C.H. participants and sponsoring programs also provide co-payments, based on percentage formulas built into contract options. Combined, these sources provide over \$1 million in support for T.E.A.C.H. IOWA annually.

Summary of data or actual data from the project for the grant period to date:

- From October 1, 2011 to September 30, 2012, T.E.A.C.H. supported active contract agreements for 165 different early care and education practitioners with these ECI state professional development funds. Some practitioners attended only one or two semesters during this year, due to their graduations and completions of CDA credentials, and were replaced by other scholarship participants. Our submitted quarterly reports show diverse representation from State Funded preschool, Early Childhood Special Ed classrooms, Head Starts, and Shared Visions Programs who supported at least one T.E.A.C.H. participant with help from these funds, as well as the more traditional DHS licensed child care centers, preschools, and registered homes.
- One hundred percent of scholarship participants who completed an associates' or bachelors' level contract with T.E.A.C.H. between October 2011 and September 2012 completed at least nine college credits and earned a compensation increase (raise or bonus). During this fiscal year, --84 participants finished at least one contract and averaged 13.89 credits per contract. Over 95% are on track to do so. Successful fulfillment of contracts indicates that participants

Professional Development Update

are on track and making progress towards credential and degree completion.

- The average GPA for fall 2011 through summer 2012 for participants funded by this source was 3.57/4.0 for community college students, and 3.71/4.0 for four year college or university students. The combined average was 3.61/4.0.
- Over 95% of participants are on track and making progress toward this measure and their individual professional goals. A total of 748.5 credits were completed with support of this funding during the last fiscal year. Participants completed and earned fifty CDAs, five associate degrees, five bachelors' degrees, and three early childhood endorsements.

Our professional staff provided more than 120 outreach presentations across the state in this contract year. These presentations, to boards, at program staff meetings, at state-level committee meetings, and at state and local early childhood conferences, covered topics such as professional development self-assessment, understanding the educational requirements for early care providers in multiple systems, the CDA process, and recruitment for T.E.A.C.H., among others. T.E.A.C.H. staff and advisory committee members serve in leadership roles in Early Childhood lowa component groups relevant to the values of T.E.A.C.H.

Iowa Family Support Credentialing Program

The lowa Family Support Credentialing program is a quality improvement framework for family support programs. Technical assistance is provided to enrolled programs to improve practice and to demonstrate adherence to the Iowa Family Support Standards. Programs complete a self-evaluation with the assistance of their technical assistance mentor to evaluate their adherence to the standards. The results of the self-evaluation formulate the quality improvement plan. A peer review is scheduled when the program determines that they are in adherence in both policy and practice to all of the 139 standards. The peer review team carefully reviews all assessment materials, interviews key stakeholders, observes activities, and reviews family files to determine if the program is in adherence to the standards. A certificate of achievement and recognition is awarded to the program by the state once a program is found to be in complete adherence to the Iowa Family Support Standards.

The Iowa Family Support Credentialing Program (IFSCP) primarily supports the Family Support oval; however it does impact all sectors of the early childhood system in Iowa. The Iowa Family Support Standards apply to both family support programs and the organizations that administer those programs. Many organizations offer programming or services in all sectors.

Output Measures:

Number of active technical assistance mentors: 22

Number of peer reviews provided: 9

Number of hours of technical assistance provided: 1,684 hours

Number of programs awarded the Iowa Family Support Credential through the alternate method: 2

Number of programs awarded the Family Support Credential through the standard method: 8

Quality Efficiency Measures:

Average cost per program for technical assistance services: \$546

Average cost per program for peer review services: \$6,610

Average length of time between enrollment and earning the credential: 42 months

Percent of Iowa Counties with at least one program participating in the IFSCP: 96%

Percent of standards found to be in adherence at the conclusion of the peer review: 90%

Outcome Measures:

Percent of programs completing the peer review that are awarded the credential: 100%

Percent of programs completing the peer review that are found to be in full adherence to the standards at the conclusion of the peer review: **44%**

Percent of programs that apply for the credential using the alternate method that are awarded the credential: **100%**

Healthy Mental Development- ACE Education and Awareness

Overview/summary of program or project as per contract:

- Established an ACEs Steering Committee made up of state and local partners to work with Dr. Anda on effective approaches to developing ACEs training for communities.
- Convened 6 community trainings and/or round table discussions in October 2011 with community leaders and 1st Five medical providers from the 1st Five Healthy Mental Development sites (Story County, Black Hawk County and Polk County) to provide education, technical assistance, and community planning on the ACE study. A total of 350 participants attended for all trainings and round tables.
- Established a co-investment partnership to add ACEs module to 2012 Iowa BRFSS.
- Explored the possibility of an ACE webinar for early childhood partners across the state on the ACE study and community planning. Since it was determined that the expense was too costly, the committee is currently working on a power point that can be used for ACE training purposes for multiple audiences. A Website was also developed as a statewide communication tool at www.iowaaces360.org.
- Presented activities related to the ACE study and next steps at the ECI Alliance meetings, ECCS Regional Go-To meeting, ECCS Kansas Go-To meeting, and MCH Fall Conference.
- Held a statewide ACEs Summit in June 2012 that brought together key decision makers from state government, policy makers, business leaders, and philanthropic organizations to develop a plan for lowa. Almost 800 attended from over 80% of lowa counties where their work is conducted. Next steps are currently underway that include providing an analysis of lowa's ACE-related questions in the 2012 state BRFSS.

Professional Development Update

This work supports the mental health and health ovals by focusing on increasing understanding and preventing the root causes of mental health and chronic health conditions.

Does this project receive other funding or in-kind resources? If so, please describe.

- The Mid-lowa Health Foundation funding = \$45,000
- United Way of Central Iowa funding = \$16,000
- Iowa Dept. of Public Health, in -kind staff = \$8,000

Summary of data or actual data from the project for the grant period to date:

Conducted six ACE-related training/roundtables and one statewide summit with a total of 1,150 participants in attendance to increase awareness of ACEs and to promote community-based collaborative work in prevention and intervention for young children and their families. (Exceeded goal of 300 participants by 850).

ACE-related data from the 2012 in the BRFSS is expected to be released in June 2012. The ACE steering committee is currently working to identify the entity that will provide the data analysis and produce a report of the findings and recommendations with an anticipated release in Fall 2013.

Shaken Baby Prevention Project

Overview/summary of program or project as per contract:

This program is focused on preventing childhood abuse, death and disability. This evidence based program provides education on normal childhood development including a period of time, usually 2-5 months, when newborns experience episodes of increased crying. The parent education focuses on teaching parents the characteristics of normal infant crying and the dangers of shaking an infant and techniques to soothe and cope with crying. Infant crying has been identified as the primary trigger in shaken baby syndrome cases.

The lowa Department of Public Health has made substantial progress in implementing the Shaken Baby Syndrome Prevention program in lowa. Since December of 2009, the *Period of PURPLE Crying®* program to prevent shaken baby syndrome has been introduced and put into operation in hospitals across the state. To date 55 of 78 birthing hospitals are providing the initial prevention education at the hospital before the family leaves the hospital. This represents over 80% of the 40,000 births in lowa on an annual basis.

Does this project receive other funding or in-kind resources? If so, please describe.

• The PREVENT Team all work together to promote education, training and public awareness regarding prevention of shaken baby syndrome. Members include Steve Scott, Prevent Child Abuse Iowa, Kelly Davydov, Prevent Child Abuse Iowa, Amber

Russell, Blank Children's Hospital, Denise Easley St. Luke's Hospital Cedar Rapids, and Michael Bergan representing the Department of Management.

- Analisa Pearson and other HCCI nurse consultants, provided consultation and development of training for child care providers
- Jingzhen Yang Professor at University of Iowa College of Public Health and Kimberly Kim MPH student worked on evaluation of the program in Iowa hospitals

Summary of data or actual data from the project for the grant period to date:

- 1. The number of childcare providers, early care, health, family support and education providers trained on the Shaken Baby Syndrome Prevention The Period of PURPLE Crying: 315
- 2. Distribution of Patient Education Materials to Birthing Hospitals (*Period of PURPLE Crying*® DVD and booklet): 5,345
- 3. Produce a report on the evaluation findings and recommendations and lessons learned from the pilot project for implementing the program statewide. Key findings from the evaluation of the curriculum included the following:
 - Overall the education sessions were confirmed to be very useful and effective in teaching parents about normal infant crying, the dangers of shaking an infant and soothing and coping techniques.
 - o Nurses play and important role in program implementation
 - o Both nurse education and *Period of PURPLE Crying*® DVD are important program components, rather than either component individually by itself.
 - o First time moms are important target, but all Mothers benefit from the information
 - Continue to encourage mom to share the DVD with her child's other caretakers. 58% did not share it.
 - Ontinue efforts to disseminate the program to new mother's both prenatally and postnatally through parenting/birth classes, family physicians/pediatricians, social workers, and licensed child care providers, in order to help parents retain information about the characteristics of normal infant crying and the dangers of shaking an infant, and techniques to soothe and cope with infant crying.

SCCAC Annual Report

From Iowa Code 135.173A

8. The advisory committee shall coordinate with the early childhood lowa council its reporting annually in December to the governor and general assembly concerning the status of child care in the state, providing findings, and making recommendations. The annual report may be personally presented to the general assembly's standing committees on human resources by a representative of the advisory committee.

Formation and Purpose of the State Child Care Advisory Committee

The State Child Care Advisory Committee was formed in 2010 through Iowa Acts, Ch 1031, 354, 351; Iowa Acts, ch 1192, Section 84 to begin July 1, 2011. It replaced the State Child Care Advisory Council that was originally created in state law in Iowa Code 237A.21. The role of the committee is to advocate for a quality child care system to serve children of Iowa from birth through school age.

The State Child Care Advisory Committee is an advisory body with membership consisting of representatives from child care – both centers and developmental homes, advocacy, the Departments of Education, Public Health, Human Services and any other applicable government agency, Head Start program provider, Child Care Resource and Referral, and various other representatives from ISU Extension, and professional child care organizations that are interested in the child care system in Iowa.

The Committee is charged with providing advice and making recommendations to the Governor, General Assembly, the Department of Human Services, and other state agencies concerning child care. They meet in the Des Moines area every other month.

Summary of Committee Discussions During SFY 2012 Getting Started

As the State Child Care Advisory Committee was being established, it focused first on how the former State Child Care Advisory *Council* had operated. Over the first few meetings a process was identified for the new Committee to operate. Because this Committee is a part of the Early Childhood lowa structure, the group learned about its relation to and within the system. The committee is identified as a committee of the Quality Programs and Services Component Group. The Committee also worked with the state agencies for which it provides input. For example, an arrangement between the Committee and the Department of Human Services was agreed upon for information sharing on a regular basis, determined a protocol for items to share, etc.

By the conclusion of the September 2011 meeting, both co-chairs were identified and elected to serve as leadership for the group. They are Analisa Pearson from the Iowa Department of Public Health and Heidi Schlueter from First Children's Finance, which follows ECI's precedent of public and private representation in workgroup leadership.

2012 Workplan

The 2012 Work Plan was developed with input from most of the SCCAC members. The priorities are based on the ECI Strategic Plan, the SCCA Council Leadership Agenda and Child Care Development Fund State Plan consultation process regarding biennium goals, and the Child and Family Policy Center 5-Year Child Care plan.

Workgroup Formation

By March, 2012, the Committee formed three workgroups according to the 2012 Work Plan. Those initial workgroups included:

- Child Care Assistance.
- Iowa Quality Rating System (IQRS) Barriers to Participation
- Child Care Regulations Workgroup.

Ad hoc groups may also be formed, as necessary. Details of the initial standing workgroups are described below.

A section on the ECI website includes the State Child Care Advisory Committee information: meeting agendas, meeting minutes, group products and a meeting schedule.

http://www.earlychildhoodiowa.org/state_system/ECI_comp_wrkgrps/quality_services_programs/state_child_care_advisory/index.html.

Update of Work Conducted by Each Workgroup

Child Care Assistance

In response to the expressed concern by the SCCAC on pending decisions regarding Child Care Assistance funding, this workgroup drafted a letter to the State Appropriations Subcommittee, informing the Subcommittee of the certain negative impacts if families were to be placed on a waiting list due to inadequate funding of the Child Care Assistance Program.

This workgroup is currently planning a webinar on co-pay policies, entitled, "Best Practices for Collecting Child Care Tuition and Fees." This subject matter was determined to be a need. Providers need good practices around billing and collecting tuition, and would benefit from learning from each other.

SCCAC Annual Report

IQRS - Barriers to Participation

The workgroup looked at provider-identified barriers to participation and decided that many group members had heard anecdotally of barriers or perceived barriers to participation; however, it was unknown how widespread and comprehensive the barriers to participation were. A statewide survey of all known providers would best solicit input from all providers. The QRS Oversight Team had also been planning a similar initiative to request feedback from child care providers. Workgroup members provided recommendations and worked with the QRS Oversight Team in development of the survey that the Department of Human Services sent electronically to all known child care providers in lowa in August. The workgroup will structure ongoing work based on barriers identified.

Child Care Regulations Workgroup

A workgroup met initially around License Exempt programs due to concerns raised by committee members related to lack of understanding of oversight and regulations for programs licensed by the Department of Education. This workgroup met for a couple of months to ascertain that the Quality Preschool Program Standards had taken the place of an earlier (1990's) one page guidance document from the Department of Education for preschool programs. Quality Infant and Toddler Standards were being developed to replace the earlier regulations, and these were completed in 2012 by the Department of Education. School-age programs are encouraged by the Department of Education to follow best practice standards, but there are currently no requirements for this age group. The strengthening of the regulations and/or oversight of the current License-Exempt regulations was then seen as appropriate to be included in a broader Child Care Regulations Workgroup.

In addition to continuing work that began by the License-Exempt ad hoc group, the Child Care Regulations Workgroup met with DHS Child Care Bureau staff to learn more about the current status of licensure staff, policies and procedures. The group conducted a survey of child care providers, and child care consultants (including nurse consultants) to gather more input on the status of child care from the different perspectives.

Updates/Presentations to the Committee

Presentations assist members to be better informed about a part of the child care system. Items covered during this fiscal year included the below listed topics. A website has been provided should you want to learn more about these items.

- Overview of Child Care Resource and Referral http://iowaccrr.org/
- Child Care Nurse Consultant http://www.idph.state.ia.us/hcci/consultants.asp
- Iowa Head Start www.iowaheadstart.com

•T.E.A.C.H. Early Childhood Iowa - http://www.iowaaeyc.org/teach.cfm

Accomplishments by the Committee

- Formed July 14, 2011
- Provided input on a questionnaire that DHS sent to child care providers regarding participation within the QRS system
- Established three workgroups
- Letter to the State Appropriations Subcommittee informing legislators of the negative impacts of inadequate funding for Child Care Assistance leading to families on a wait list.

Current Council Members (as of end of SFY 2012)

Amy Bruner Hawkeye Community Action Program, Inc.

Sue Cooper Skip-A-Long Child Development Center – Licensed Center

Erin Davison-Rippey Iowa Afterschool Alliance

Chad Dahm Iowa Dept. of Human Services

Jill Dodds Child Development Home Provider

Pam Ellis Iowa Association for the Education of Young Children

Jessica Gituma Parent

Sheila Hansen Child and Family Policy Center - Every Child Counts

Julie Ingersoll Iowa Dept. of Human Services

Melissa Juhl Mid-Sioux Opportunity, Inc - Child Care Resource and Referral

Amy Karaidos Visiting Nurse Services of Iowa

Donna Kennebeck Mercy Child Development Center – Licensed Center

Rep. Kevin Koester State Representative LouAnn Mowrey Family Resource Center

Larraine Murray Child Development Home Provider

Lesia Oesterreich Iowa State University

Analisa Pearson Iowa Dept. of Public Health

Laurine Price Green Hills AEA – Early ACCESS (previously a home provider)

Kathie Readout Mid-Iowa Community Action - Iowa Head Start

Tom Rendon Iowa Dept. of Education- Head Start State Collaboration Office

Michelle Rich Iowa Afterschool Alliance Heidi Schlueter First Children's Finance

Kim Smith Child Development Home Provider

Shanell Wagler Iowa Dept. of Management - Early Childhood Iowa Office
Stacey Walters Capitol Park Early Learning Center – Licensed Center
Cathy Wheatcraft Orchard Place - Child Care Resource and Referral

Information regarding the State Child Care Advisory Committee is found at:

http://www.earlychildhoodiowa.org/state system/ECI comp wrkgrps/quality services programs/state child care advisory/index.html.





2012 Early Childhood Iowa-Family Support Summary

ZOIZ Larry Crimaricoa				
Input Data	2012	2011	2010	2009
ECI funds expended on family support programming	\$13,242,608	\$13,934,690	\$15,577,385	\$17,081,818
Other funds supporting family support programming	\$4,067,162	\$2,879,951	\$2,165,783	N/A
Number of family support programs supported	161	168	189	180
Percentage of funds expended on programs with	91.13%	90.72%	89.62%	Not
a home visit component				reported
Percentage of funds expended on programs are evidence-	44.72%	38.19%		
based or promising (Iowa Code definition)				
Number of group-based parent education	40	45	58	61
Number of short-term home visiting programs	17	21	24	33
Number of long-term home visiting programs	76	73	78	63
Number of intensive, long-term	28	29	29	23
home visiting programs				
Output Data	2012	2011	2010	2009
Number of children (0 – 5) served	17,560	19,523	22,724	22,707
Number of families served	12,864	14,455	17,396	16,833
Number of home visits provided	99,863	100,750	102,566	120,792
Number of group meetings offered	4,596	4,614	5,439	4,593
Percentage of children (0 – 5) population served due to	7.19%	7.92%	9.35%	9.35%
limited funding				
Percentage of families served with incomes at 200% of FPL	84%			
or lower				
Of the families served	2012	2011	2010	2009
Percentage that has a head of household that is non-	33%	31%	29%	32%
Caucasian				
· ·				
Percentage that has a head of household that is not	57.5%	57%	56%	56%
	57.5%	57%	56%	56%
Percentage that has a head of household that is not	57.5%	57% 74%	56% 74%	56% 73%
Percentage that has a head of household that is not married				
Percentage that has a head of household that is not married Percentage that has four or fewer family members		74%	74%	73%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to		74%	74%	73%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less	74%	74%	74%	73%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high	74%	74%	74%	73%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL	74% 56%/28%	74% 22%/37%	74% 36%/21%	73% 34%/22%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high	74% 56%/28%	74% 22%/37%	74% 36%/21%	73% 34%/22%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education	74% 56%/28% 58%	74% 22%/37% 57%	74% 36%/21% 57%	73% 34%/22% 59%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data	74% 56%/28% 58% 2012	74% 22%/37% 57% 2011	74% 36%/21% 57% 2010	73% 34%/22% 59% 2009
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data Percentage of children 0 – 5 screened for developmental	74% 56%/28% 58% 2012	74% 22%/37% 57% 2011	74% 36%/21% 57% 2010	73% 34%/22% 59% 2009
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data Percentage of children 0 – 5 screened for developmental delays	74% 56%/28% 58% 2012 68.89%	74% 22%/37% 57% 2011 54.35%	74% 36%/21% 57% 2010 56.09%	73% 34%/22% 59% 2009 44.91%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data Percentage of children 0 – 5 screened for developmental delays Of the children screened, the percentage that were referred to early intervention services Percentage of direct service staff with a bachelor's degree	74% 56%/28% 58% 2012 68.89%	74% 22%/37% 57% 2011 54.35%	74% 36%/21% 57% 2010 56.09%	73% 34%/22% 59% 2009 44.91%
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Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data Percentage of children 0 – 5 screened for developmental delays Of the children screened, the percentage that were referred to early intervention services Percentage of direct service staff with a bachelor's degree or higher in education, health, human services or a related field	74% 56%/28% 58% 2012 68.89% 8.24% 61.49%	74% 22%/37% 57% 2011 54.35% 11.86%	74% 36%/21% 57% 2010 56.09% 9.60%	73% 34%/22% 59% 2009 44.91% 11.95%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data Percentage of children 0 – 5 screened for developmental delays Of the children screened, the percentage that were referred to early intervention services Percentage of direct service staff with a bachelor's degree or higher in education, health, human services or a related field Percentage of direct service staff with a bachelor's degree	74% 56%/28% 58% 2012 68.89% 8.24%	74% 22%/37% 57% 2011 54.35% 11.86%	74% 36%/21% 57% 2010 56.09% 9.60%	73% 34%/22% 59% 2009 44.91% 11.95%
Percentage that has a head of household that is not married Percentage that has four or fewer family members Percentage of households with incomes of \$20,000 to \$10,001 / \$10,000 or less Percentage of households with incomes at or below 100% of FPL/ or below 200% to 101% of FPL Percentage that has a head of household with a high school diploma or less education Quality and Efficiency Data Percentage of children 0 – 5 screened for developmental delays Of the children screened, the percentage that were referred to early intervention services Percentage of direct service staff with a bachelor's degree or higher in education, health, human services or a related field Percentage of direct service staff with a bachelor's degree or higher in an unrelated field or are a registered nurse	74% 56%/28% 58% 2012 68.89% 8.24% 61.49%	74% 22%/37% 57% 2011 54.35% 11.86%	74% 36%/21% 57% 2010 56.09% 9.60%	73% 34%/22% 59% 2009 44.91% 11.95%
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2012 Early Childhood Iowa-Family Support Summary

•		= =	<u>-</u>	_
state or a national credentialing program				
Percentage of families completing the outcome	67.38%	70.94%	70.06%	75.74%
assessment				
Outcome Data	2012	2011	2010	2009
One: Participating families that improve or maintain	84.32%	83.50%	79.87%	80%
healthy family functioning, problem solving and				
communication				
Two: Participating families that increase of maintain	81.09%	82.81%	79.80%	81%
social supports				
Three: Participating families that are connected to	73.67%	78.22%	70.55%	67%
additional concrete supports				
Four: Participating families that increase knowledge	69.43%	75.15%	67.02%	68%
about child development and parenting				
Five: Participating families that improve nurturing and	67.47%	74.46%	66.77%	63%
attachment between parent(s) and child(ren)				

Data by Program Type

GROUP-BASED PARENT EDUCATION	2012	2011	2010
Total School Ready Funds Expended	\$1,175,360	\$1,303,082	\$1,647,497
School Ready Funds expended on evidence-based or promising practice	29.98%		
programs			
Cost per group offered	\$612.69	\$589.27	\$584.63
% of participants that completed a pre and post assessment	67%	66%	51%
% of children screened for developmental delays	39%	19%	20%
% of direct service staff with a bachelor's degree or higher	73%	71%	78%
% of direct service staff with a bachelor's degree or higher in an unrelated	12%		
field or are a registered nurse (not included above)			
Outcome One achievement rate	81%	83%	79%
Outcome Two achievement rate	80%	85%	80%
Outcome Three achievement rate	71%	75%	66%
Outcome Four achievement rate	70%	74%	70%
Outcome Five achievement rate	71%	72%	70%

SHORT-TERM HOME VISITATION	2012	2011	2010
Total School Ready Funds Expended	\$801,898	\$873,670.93	\$1,062,532.40
School Ready Funds expended on evidence-based or promising practice	27.54%		
programs			
Cost per home visit	\$120.87	\$132.57	\$175.51
Average number of home visits per family served	4.65	3.54	2.47
% of participants that completed pre and post assessment	51%	54%	60%
% of children screened for developmental delays	40%	43%	69%
% of direct service staff with a bachelor's degree or higher	39%	63%	51%
% of direct service staff with a bachelor's degree or higher in an unrelated	49%		
field or are a registered nurse (not included above)			
Outcome One achievement rate	79%	81%	77%
Outcome Two achievement rate	83%	80%	61%
Outcome Three achievement rate	57%	58%	58%
Outcome Four achievement rate	53%	61%	57%
Outcome Five achievement rate	48%	56%	57%



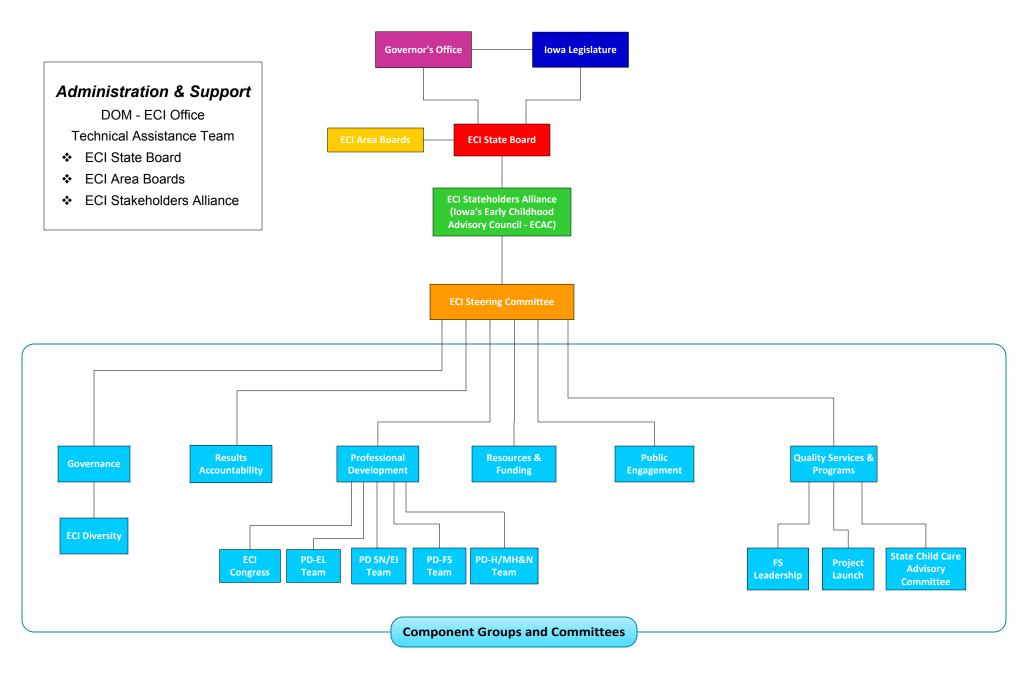
2012 Early Childhood Iowa-Family Support Summary

LONG-TERM HOME VISITATION	2012	2011	2010
Total School Ready Funds Expended	\$7,257,413	\$7,323,643	\$8,530,124
School Ready Funds expended on evidence-based or promising practice	45.61%		
programs			
Cost per home visit	\$142.82	\$142.72	\$137.53
Average number of home visits per family served	9.65	8.95	8.82
% of participants that completed both a pre and post assessment	69%	73%	82%
% of children screened for developmental delays	85%	61%	68%
% of newly enrolled families that met one or more of the eligibility criteria	94%		
% of direct service staff with a bachelor's degree or higher	54%	62%	63%
% of direct service staff with a bachelor's degree or higher in an unrelated	15%		
field or are a registered nurse (not included above)			
Outcome One achievement rate	86%	82%	82%
Outcome Two achievement rate	82%	82%	81%
Outcome Three achievement rate	74%	81%	74%
Outcome Four achievement rate	70%	78%	69%
Outcome Five achievement rate	67%	77%	68%

LONG-TERM, INTENSIVE HOME VISITATION	2012	2011	2010
Total School Ready Funds Expended	\$4,007,937	\$4,434,294	\$4,337,231
School Ready Funds expended on evidence-based or promising practice	55.02%		
programs			
Cost per home visit	\$201.24	\$173.49	\$127.96
Average number of home visits per family served	14.82	16.23	15.24
% of participants that completed both a pre and post assessment	75%	83%	90%
% of children screened for developmental delays	88%	77%	70%
% of newly enrolled families that met one or more of the eligibility criteria	98%		
% of direct service staff with a bachelor's degree or higher	67%	67%	62%
% of direct service staff with a bachelor's degree or higher in an unrelated	14%		
field or are a registered nurse (not included above)			
Outcome One achievement rate	86%	89%	82%
Outcome Two achievement rate	81%	85%	81%
Outcome Three achievement rate	85%	86%	77%
Outcome Four achievement rate	74%	77%	64%
Outcome Five achievement rate	75%	82%	64%

- Family and child count is not an unduplicated count. Families may participate in more than one program during the course of a year or move from one service area to another. A longitudinal data collection system would be necessary to provide an unduplicated count.
- 2009 data was collected but not disaggregated by program type.
- Short-term home visitation, long-term home visitation, Intensive home visitation, and group-based parent education are defined in the ECI tool FF.
- Evidence-based and promising programs are defined were defined in Iowa Code in 2012. The definitions are also found in the ECI tool FF.
- Cost per service information is based on data provided by the local ECI area. Information may be incomplete as non-ECI funds are not required to be reported.
- Participants may not complete a post-assessment if they choose to terminate services without completing the program. The reasons for terminating services will vary. Programs are encouraged to track the reasons and report to the local ECI board.
- Outcomes one through five are derived from valid, reliable assessment tools. Group-based parent education and short-term home visitation are required to use the Protective Factors Survey. All other programming is required to utilize the Life Skills Progression Instrument. Participants must be served for a minimum of six months to produce valid results with the Life Skills Progression Instrument.

Early Childhood Iowa





Results Accountability.

Vision: Every child, beginning at birth, will be healthy and successful.

Purpose: To empower collaborative, systemic efforts to achieve the following desired results:

- 1. Healthy Children
- 2. Children Ready to Succeed in School
- 3. Safe and Supportive Communities

- 4. Secure and Nurturing Families
- 5. Secure and Nurturing Early Learning Environments

Descriptions

	Descriptions
Governor	 Signed legislation to create Community Empowerment, creating a partnership between communities and the state to support young children and their families (1998) Signed legislation to transform Community Empowerment into Early Childhood Iowa (ECI), establishing the ECI Stakeholder Alliance as the state's Early Childhood Advisory Council (2010) May request or receive information from the ECI State Board and/or ECI Stakeholder Alliance
Iowa Legislature	 Created Community Empowerment/Early Childhood Iowa, along with the ECI State Board and Local Boards, to provide governance for planning and collaboration of services to support young children and their families. Provides a state appropriation and a TANF transfer to support efforts at the state and local levels. May request or receive information from the ECI Stakeholder Alliance
ECI State Board	 Provides oversight of the ECI Area Boards. Includes citizen members appointed by the governor; the directors (or designees) of the Departments of Education, Economic Development Authority, Human Rights, Human Services, Public Health, and Workforce Development; and ex-officio legislators May request or receive information from the ECI Stakeholder Alliance
ECI Area Boards	 Charged to reach the desired results to improve the quality of life for young children and their families. Consist of citizens, elected officials, and representatives of education, health, human services, faith, business and consumers.
ECI Stakeholder Alliance (SA)	 A confederation of stakeholders in early care, health and education systems that affects young children in the State of Iowa. Purpose: Overseeing/providing input into the development of a comprehensive, integrated early childhood system for Iowa that meets the needs of children 0-5 years and families; integrates the early learning; health/mental health/nutrition; family support and special needs/early intervention systems; supporting the ECI State Board in addressing the early care, health and education systems that affect children ages 0-5 years. Advises the governor, general assembly, state board, and other public and private policy bodies and service providers in coordinating activities and policies related to Iowa's comprehensive early childhood system.
ECI Steering Committee	 Established to provide leadership, organize, manage, and coordinate the activities of the ECI Stakeholder Alliance and the component groups.
ECI Component Groups and Committees	 Address key areas of lowa's early childhood system. Ensure that each component of the system is present and functioning as well as possible and work on the implementation of specific strategies within the ECI strategic plan. Groups and committees focus on the essential elements of an early childhood system including: Governance, Planning and Administration; Professional Development; Public Engagement; Quality Services and Programs; Resources and Funding; and



EARLY CHILDHOOD IOWA STATE BOARD STRATEGIC PLAN FY 2013 - FY 2016

Iowa's Early Care, Health and Education System Vision: Every child, beginning at birth, will be healthy and successful.

Early Childhood Iowa Results

Early Childhood Iowa Communities will develop the capacity and commitment for achieving the results of:

- Healthy Children
- Children Ready to Succeed in School
- Safe and Supportive Communities
- Secure and Nurturing Families
- Secure and Nurturing Early Learning Environments

Mission Statement

The Early Childhood Iowa State Board builds and maintains community capacity to deliver a comprehensive and integrated early care, health and education system to advance the five legislated results.

Guiding Principles

- Results-focused decision making
- Promote evidence-based practices
- Accountability
- Collaboration
- Respect for all
- Cultural Competence

	Goals						
Achieving Desired Results	Efficient and Effective System	Advocacy					
The ECI State Board will provide leadership and support for the ECI area boards to achieve desired results.	The ECI State Board will implement an accountable system that is coordinated, effective and performance-based.	The ECI State Board will expand public and private awareness of and support for Iowa's early care, health and education system.					
	Strategies						
1. Prioritize and evaluate required measures for local boards to promote continual improvement.	1. Promote activities based on the guiding principles as a foundation for state and local systems.	1. Develop a marketing/communication plan to share the importance of early childhood with diverse audiences.					
2. Develop guidance and policy direction to support local boards.	2. Strengthen the board's leadership and understanding of the ECI system.	2. Strengthen opportunities for private public partnerships to support early childhood efforts.					
3. Expand the professional development opportunities for both state and local board members.	3. Evaluate state board performance, process includes local and system-level partner feedback.	3. Identify opportunities for board members to educate at both state and local levels on early childhood topics.					



Early Childhood Iowa Levels of Excellence Rating System— General Policies Effective July 1, 2011 – June 30, 2014

I. Purpose:

To receive ECI funds, the ECI State Board must designate the ECI area board. The Levels of Excellence is the rating system used to designate an area board. (lowa Code, Chapter 256I)

II. Legal References:

Iowa Code 256I.4(8):

8. Develop and implement a levels of excellence rating system for use with the state board's designation process for area boards. Allow for flexibility and creativity of area boards in implementing area board responsibilities and provide authority for the area boards to support the communities in the areas served. The levels of excellence rating system shall utilize a tiered approach for recognizing the performance of an area board. The system shall provide for action to address poor performing areas as well as higher performing areas. Subject to the funding requirements and other requirements established in law, if an area board achieves the highest rating level, the state board may allow special flexibility provisions in regard to the funding appropriated or allocated for that area board. The state board shall determine how often area boards are reviewed under the system.

The Early Childhood Iowa State Board will adopt policies and criteria to further define and implement the Levels of Excellence Rating System.

III. Categories for Review:

The Levels of Excellence Rating System reviews board operations and expectations within the following categories. The ECI Area Board creates a portfolio to document required and optional items. The criteria are found within the LOE review matrix.

Section I: Community Plan

• Section II: Annual Report

Section III: Operational

Section IV: Public Awareness

Section V: Supporting Quality Programming

Section VI: Open Meetings/Open Records Laws

• Section VII: Fiduciary/Fiscal

The Levels of Excellence identifies criteria for each of the previous categories for the Compliant, Quality and Model Levels. Some criteria are required and some are optional based on the level. For example, to receive 'compliant' level, the area board must meet all criteria for the Compliant Level in each category.

IV. Identification of the Levels:

The Levels of Excellence Rating System consists of the following levels:

Probation Level –

A probation level rating means that the ECI area board does not meet the Compliant Level. The ECI area board must complete a corrective action plan that describes the action steps necessary to meet the Compliant Level. In addition, the State Technical Assistance Team will coordinate intensive technical assistance with the area board.

An area board can remain at this level for 1 year. Six months from the date the area board is notified of the probation level rating the State TA Team will evaluate the area board's progress in meeting the action steps identified in the corrective action plan. If, after a year, the area board is still at the probation level, the area board must merge with an ECI area that shares a geographic boundary.

Compliant Level –

Area boards achieving this rating meet all foundational requirements of an ECI area. In addition to meeting requirements in Iowa law, the area board operates at a fundamental level.

This designation is effective for three years.

Quality Level –

Areas receiving this rating meet all criteria at the Compliant Level and additional criteria in the Levels of Excellence matrix at each cycle. Documentation that all criteria are met each year of the cycle is submitted.

This designation is effective for four years.

· Model Level -

The highest rating within the Levels of Excellence Rating System is the Model Level. The area board meets all criteria at the Compliant Level and additional criteria in the Levels of Excellence matrix for each cycle. Documentation that all criteria are met each year of the cycle is submitted.

The ECI State Board designates Model Level areas for five years.

V. Documentation Area Boards must submit through this Process:

The ECI Area Board creates a portfolio to document required and optional items. The area board must submit one (1) signed original and one (1) copy of the portfolio to the ECI Office by December 30. Documentation will not be returned to the ECI Areas. Items to be included are outlined in the levels of excellence matrix. In addition, a completed review matrix must be included within the submitted documentation. Highlight, tab or clearly mark the location of each item within the portfolio. The items which are bold in the review matrix reflect those items that are legislatively required.

An onsite visit is planned between the State Technical Assistance Team and the area. It includes time with the board, the area director and community partners.

Early Childhood Needs Assessment (Part 1) A Baseline on Iowa's Young Children -Capturing the 'Demand' for Early-Childhood Services Fall 2012

The first five years of life are critically important to setting the overall developmental trajectory of children. Differences among children in opportunity are present even at the time of birth, and differences in health, education and overall development are profound by age three. Up to half of all subsequent school difficulties are evident at kindergarten entry.

Increasingly, Iowa policymakers and communities, like their counterparts in states across the U.S., are looking at what they can do to support children's healthy development during the first five years—the approximately 2,000 days that are so critical to children's lifelong prospects.

They need information at state, county and community levels to do so. This report, the first part of a comprehensive needs assessment produced on behalf of the Early Childhood Iowa Stakeholder Alliance and Early Childhood Advisory Council, provides a compilation of such information for Iowa, focusing on:

- Demographic trends involving young children
- Conditions and factors related to the child and his or her family that can place that child at high need
- Community characteristics that can place additional strain on the families and children living in those places

Topline Findings

Analysis of data on the young-child population in Iowa found a series of themes falling into three areas:

Statewide population trends

- Iowa continues to be a slow-growing state, but its share of young children has grown and is now comparable to the U.S. average. From 2000 to 2010, lowa's total population grew 4.1 percent, compared with 9.7 percent nationally. In that period, the state's young-child population grew 6.7 percent, compared with 4.8 percent nationally. In fact, although Iowa is still older-than-average overall, its share of young children is now very similar to the U.S. (6.6 percent, compared with 6.5 percent). Relatively slow growth is projected through 2020.
- **lowa is becoming more diverse, and lowa's child population is leading the way.** All parts of the state are becoming more diverse, and population growth among children of color and/or of Hispanic descent is the sole driver of population growth in that age group in lowa.
- Both single parenting and parental work involvement have risen dramatically over the past decades. The percent of births to single lowa mothers rose from 7 percent to 34 percent between 1970 and 2010, and the state has one of the highest shares of young children with all parents in the work force—74 percent. These patterns have contributed to an increased need for child care and put new stresses on families.

Defining populations of children with high needs

- There is no one measure that captures "need" among children; rather a cluster of
 characteristics that contribute to good or bad outcomes. On average, the prevalence of poor
 early-childhood outcomes is highest among children of less-educated, unmarried or adolescent
 parents, parents who are depressed, parents with limited incomes who have difficulty meeting
 basic needs, and among children with special needs themselves.
- Asignificant share of Iowa families face economic stress; many are headed by young and less-educated parents. More than 40 percent of Iowa's young children live in households below 200 percent of poverty, a realistic measure of what it takes to support a family. Nearly one in five (19 percent of the total) live in households below 100 percent of poverty (\$22,314 for a family of four in 2010). In 2010, 17 percent of Iowa first-time births, and 8 percent of total births, were to adolescent mothers, almost all of whom were unmarried with less than a high school diploma.
- Another significant share of lowa children have special health needs. In fact, 21 percent of
 lowa children four months to five years of age are at moderate or high risk of developmental,
 behavioral or social delays. Based on national research, we know over 50 percent of young
 children begin kindergarten behind in at least one area of special need and over 20 percent have
 multiple needs that require even greater levels of support.

Defining at-risk communities

- Children with high needs are not evenly distributed across lowa. By grouping counties based on population and proximity to major cities, strong patterns emerge, with children living in the outlying metropolitan counties adjacent to large cities faring the best on average, and children in central-city counties and regional centers—counties anchored by towns of 10,000 to 50,000 people—often faring the worst.
- Different levels of geography show distinct patterns of risk. Analysis of well-being indicators at the county level often shows that risks are relatively dispersed around the state. But when analysis turns to the much small-scale census tracts, high-poverty neighborhoods—the vast majority located in lowa's largest cities—stand out as having the greatest challenges by far.
- Despite variations, there is opportunity to better support children in every lowa community. Even in relatively unstressed communities, there are families struggling to afford child care and other basic needs, juggle work and school commitments or manage special health needs.

Produced for Early Childhood Iowa by: Child and Family Policy Center

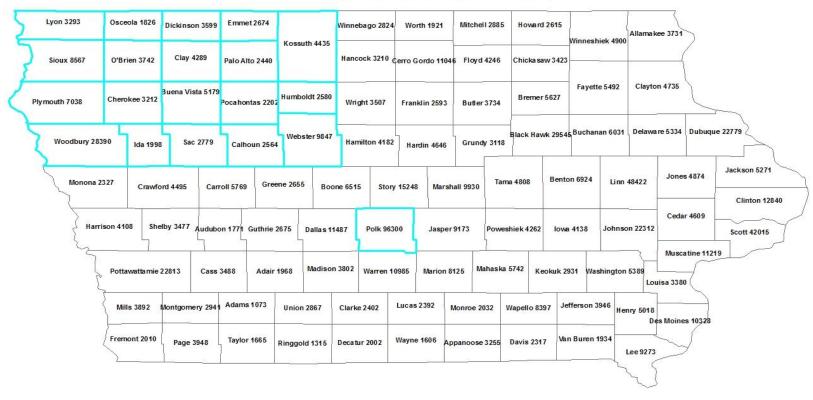
Polk County Early Childhood Iowa

Demographic Information

Presentation to Education Appropriations Subcommittee 02/20/13



0-17 Population By County





Iowa Kids Ages 0-5 Living in or near poverty level

- 19.5% of Iowa kids ages 0–5 are living under 100% of poverty level
- 44.2% of Iowa kids ages 0–5 are living under 200% of poverty level

Source: Child & Family Policy Center, American Community Survey 2011

100% Federal Poverty Level = \$23,050 for family of 4 200% Federal Poverty Level = \$46,100 for family of 4



Polk County Population

- •Total Population = 430,640
- •Total child population ages 0-17 = 109,925
- •Total child population ages 0-5 = 39,122
- •Total non-white child population ages 0-17 = 32,194 (29%)

Population Growth 2000 to 2010

- •Overall population growth = 15%
- •Child population 0-17 growth = 14%
- •Child population 0–5 growth = 17%
- •Non-white child population 0-17 growth = 72%



Polk County Poverty

- Number of children ages 0–17
 living below FPL = 15,740 (14.5%)
- Number of children ages 0–5 living below FPL = 7,144 (19%)
- Change in child poverty ages 0-17 in Polk County from 2000-2010 = 54.3%
- Approximately 8,000 children ages 0–4 WIC eligible (25% of 0–4 population)



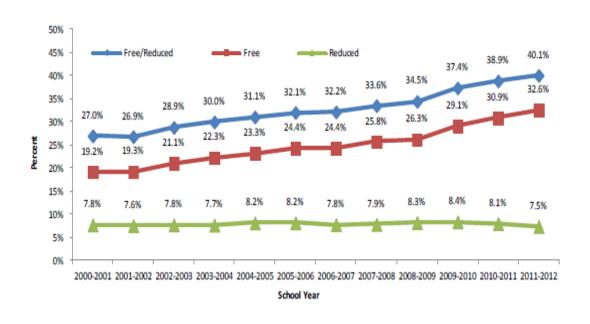
Polk County School Districts 2009-2010

District	Enrollment	FRPL eligibility (number)	FRPL eligibility (percent)	ELL (number)	ELL (percent)	Minority (number)	Minority (percent)
Ankeny							
	8,162	833	10.20%	67	0.90%	707	8.60%
Bondurant Farrar							
	1,301	229	17.60%	17	1.30%	60	4.50%
Des Moines Public School							
	30,050	18,811	62.60%	4,354	13.80%	15,801	48.80%
Johnston							
	5,989	850	14.20%	160	2.80%	999	16.10%
North Polk							
	1,222	134	11.00%	N/A	N/A	46	3.70%
Saydel							
	1,322	624	47.20%	32	2.40%	161	11.60%
Southeast Polk							
	5,992	1,558	26.00%	101	1.70%	648	10.80%
Jrbandale							
	3,692	694	18.80%	446	11.90%	701	18.50%
West Des Moines							
	8.763	1,875	21.40%	469	5.40%	1,976	22.50%
Total							
	57,739	25608	44.35%	5646	9.78%	21099	37%



K-12 Students in Iowa

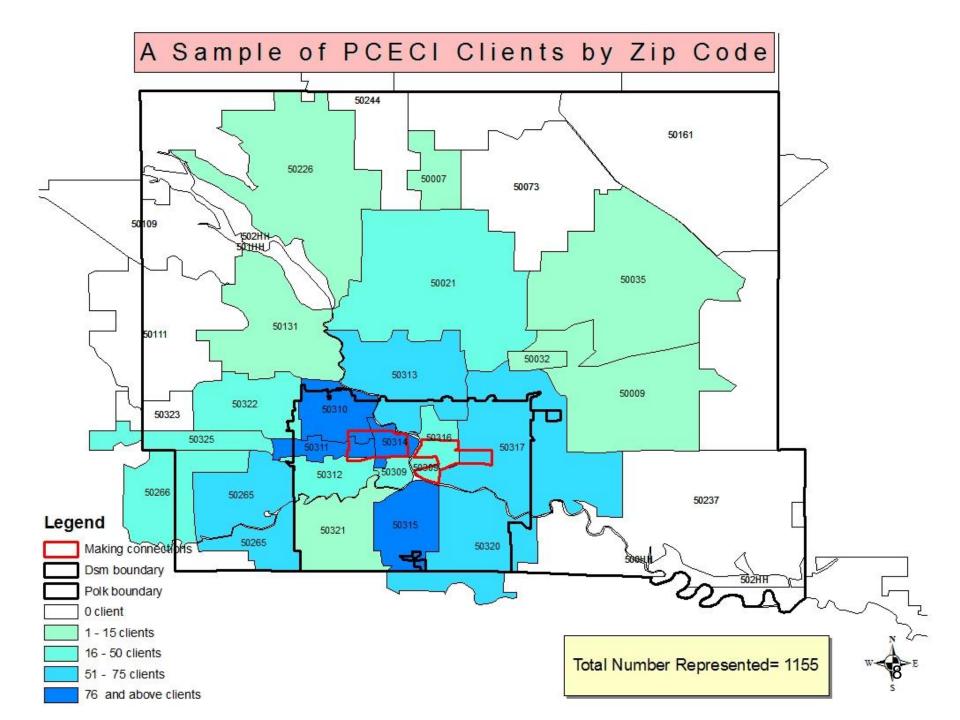
Percent of Public School K-12 Students Eligible for Free or Reduced Price Meals 2000-2001 to 2011-2012



Source: Iowa Department of Education, Bureau of Information and Analysis, Basic Educational Data Survey and EASIER.

Children in families at or below 130% below poverty level eligible = free lunch Children in families between 130% and 185% poverty level eligible = reduced lunch

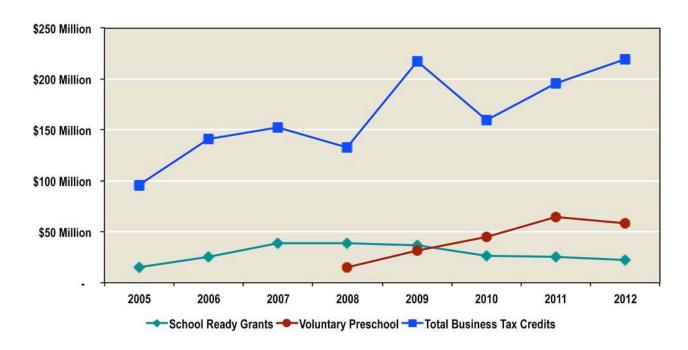








Iowa Spending on Business Tax Credits in Comparison to General Fund Spending on Early Childhood Services



- Investments in business tax credits range from just below \$100 million to over \$200 million annually
- Early Childhood Iowa School Ready grants never reached \$50 million per year, even at the height of funding
- Voluntary Preschool funding declined after its peak of \$64.5 million in FY2011

Source: Iowa Policy Project: Iowa's Investments in a Child's First 2,000 Days Early Childhood Education: Opportunities in Economic Development (April 2012)



Opportunities in Economic Development: Early Childhood Education

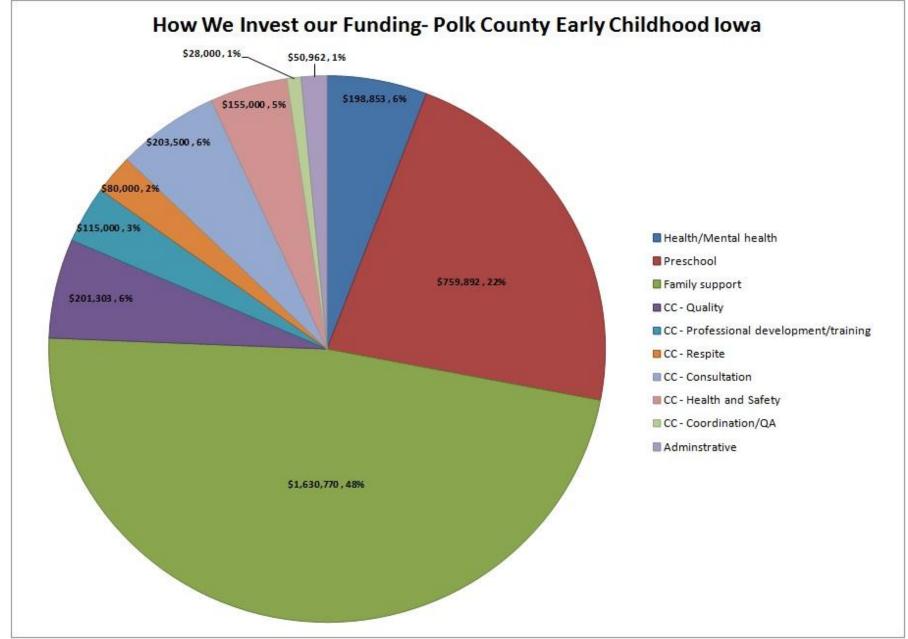
- Over the long run, a universal, high-quality preschool program would increase the employment rates of state residents by 1.3% — more than twice the rate of traditional economic development programs
- Every dollar invested in a universal, high-quality preschool program increases the present value of real earnings by \$2.78.

Source: Timothy J. Bartik, "The Economic Development Benefits of Universal Preschool Education Compared to Traditional Economic Development Programs," Report prepared for Committee for Economic Development, 2006.

- A high-quality pre-kindergarten program that served both 3- and 4-year-olds would yield relatively quick budgetary savings and would begin to pay for itself — through reduced special education costs and reduced juvenile justice costs, among others — in just nine years in lowa
- Within 42 years, the total benefits of such a program reduced crime rates and justice system costs, higher earnings by participants and thus higher tax revenues, higher workplace productivity rates, savings from reduced grade retention and special education usage, etc. — would outweigh costs by a ratio of 8.4 to 1.

Source: Robert G. Lynch, *Enriching Children, Enriching the Nation: Public Investment in High-Quality Prekindergarten,*" Washington, D.C.: Economic Policy Institute, 2007.







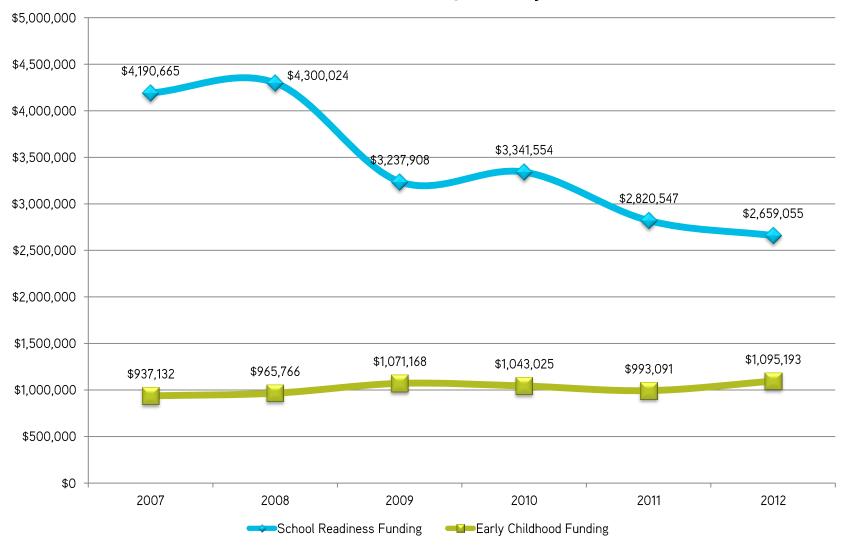
Early Childhood Iowa Funding History FY08 to FY 13

- 12% reduction in Early Childhood Funds
- 40% reduction in School Ready Funds

Fiscal year	Early Childhood Federal TANF \$	% Funding Change	School Ready State \$	% Funding Change
08	\$7,250,000		\$38,434,844	
09	\$7,250,000	0%	\$36,955,259	4% reduction
10	\$6,750,000	7% reduction from FY09 to FY 10	\$30,015,522	19% reduction from FY09 to FY10
11	\$6,350,000	6% reduction from FY10 to FY11	\$25,287,842	16% reduction from FY10 to FY11
12	\$6,350,000	0%	\$23,179,424	8% reduction from FY11 to FY12
13	\$6350,000	0%	\$23,179,424	0%



PCECI Funding History





School Ready

School Ready funds are utilized to support a comprehensive school ready children plan designed by local boards. Most of the funding is targeted for categorical purposes with specific parameters.

Funding categories include:

- Preschool Programming for Low Income Families
- Family Support and Parent Education Services for Children Prenatal-5
- Quality Improvement Funds
- General Aid
- Administrative costs (up to 3%)



Early Childhood

Early Childhood funds are used to enhance the capacity and quality of child care services to help parents obtain or retain employment.

Funding can be distributed in the following categories:

- Capacity Building
- Quality Improvement Support
- Home or Center Child Care Consultants
- Child Care Nurse Consultants
- Provider training and professional development
- Administrative costs (up to 5%)



Thank you





PCECI -Family Support Summary

Input Data	2013	2012	2011	2010	2009
TCI funds expended on family support	(July-Dec. 2012)	¢1 F00 000	Ć1 F44 147	¢1 906 699	¢1 901 767
ECI funds expended on family support	\$1,500,000	\$1,500,000	\$1,544,147	\$1,896,688	\$1,801,767
programming Other funds supporting family support	NI/A	NI/A	NI/A	NI/A	NI/A
Other funds supporting family support	N/A	N/A	N/A	N/A	N/A
programming	1	1	4	4	
Number of family support programs	1	1	1	1	1
supported	1000/	1000/	4.000/	4.000/	1000/
Percentage of funds expended on	100%	100%	100%	100%	100%
programs with					
a home visit component	1000/	1000/	1000/		
Percentage of funds expended on	100%	100%	100%		
programs are evidence-based or promising					
(lowa Code definition)					
Number of group-based parent education					
Number of short-term home visiting					
programs					
Number of long-term home visiting					
programs					
Number of intensive, long-term					
home visiting programs					
Output Data	2013	2012	2011	2010	2009
	(July-Dec. 2012)				
Number of children (0 – 5) served	459	676	758	863	524
Number of families served	426	577	641	779	427
Number of home visits provided	3,224	7,964	9,202	9,200	5,094
Number of group meetings offered	76	168	148	58	60
Percentage of children (0 – 5) population					
served due to limited funding					
Percentage of families served with	98%	100%			
incomes at 200% of FPL or lower					
Of the families served	2013	2012	2011	2010	2009
	(July-Dec. 2012)				
Percentage that has a head of household	88%	84%	82%	87%	76%
that is non-Caucasian					
Percentage that has a head of household		51%	45%	59%	63%
that is not married					
Percentage that has four or fewer family		74%	74%	74%	%
members					
Percentage of households with incomes of			40%/42%	35%/46%	%/%
\$20,000 to \$10,001 / \$10,000 or less			•		•
Percentage of households with incomes at		96%/4%			
or below 100% of FPL/ at or below 200%		' '			
of FPL					
Percentage that has a head of household	87%	59%	57%	84%	82%
with a high school diploma or less			2.,0	0.73	3270
education					
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PCECI -Family Support Summary

Quality and Efficiency Data	2013 (July-Dec. 2012)	2012	2011	2010	2009
Percentage of children 0 – 5 screened for developmental delays		92%	94%	96%	81%
Of the children screened, the percentage that were referred to early intervention services		14%	12%	15%	17%
Percentage of direct service staff with a bachelor's degree or higher in education, health, human services or a related field		100%	100%	100%	100%
Percentage of direct service staff with a bachelor's degree or higher in an unrelated field or are a registered nurse (not included above)		100%			
Percentage of family support programs participating in the state or a national credentialing program		100%	100%	100%	100%
Percentage of families completing the outcome assessment		%	%	%	%
Outcome Data		2012	2011	2010	2009
One: Participating families that improve or maintain healthy family functioning, problem solving and communication	90%	92%	94%	80%	69%
Two: Participating families that increase of maintain social supports	78%	84%	82%	77%	98%
Three: Participating families that are connected to additional concrete supports	97%	94%	96%	73%	76%
Four: Participating families that increase knowledge about child development and parenting		70%	70%	50%	47%
Five: Participating families that improve nurturing and attachment between parent(s) and child(ren)	79%	78%	78%	53%	37%

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